

# Form 1040 A

Form <b>1040A</b>		Department of the Treasury—Internal Revenue Service <b>U.S. Individual Income Tax Return</b>		2007	IRS Use Only—Do not write or staple in this space.																																										
<b>Label</b> (See page 15.)  <b>Use the IRS label.</b> Otherwise, please print or type.  <b>Presidential Election Campaign</b>	L A B E L  H E R E	Your first name and initial		Last name																																											
		If a joint return, spouse's first name and initial		Last name																																											
		Home address (number and street). If you have a P.O. box, see page 15.				Apt. no.																																									
		City, town or post office, state, and ZIP code. If you have a foreign address, see page 15.				OMB No. 1545-0074 Your social security number Spouse's social security number You must enter your SSN(s) above.																																									
Checking a box below will not change your tax or refund. Presidential Election Campaign ▶ Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 15) ▶ <input type="checkbox"/> You <input type="checkbox"/> Spouse																																															
<b>Filing status</b> Check only one box.		1 <input type="checkbox"/> Single 2 <input type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶ 4 <input type="checkbox"/> Head of household (with qualifying person). (See page 16.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶ 5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see page 17)																																													
<b>Exemptions</b> If more than six dependents, see page 18.		6a <input type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a. b <input type="checkbox"/> Spouse c Dependents: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 30%;">(1) First name</th> <th style="width: 20%;">Last name</th> <th style="width: 20%;">(2) Dependent's social security number</th> <th style="width: 20%;">(3) Dependent's relationship to you</th> <th style="width: 10%;">(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit (see page 18)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td><input type="checkbox"/></td></tr> </tbody> </table>				(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit (see page 18)					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>							
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		Boxes checked on 6a and 6b: No. of children on 6c who: • lived with you • did not live with you due to divorce or separation (see page 18) Dependents on 6c not entered above Add numbers on lines above ▶ <input type="text"/>																																													
		d Total number of exemptions claimed. <input type="text"/>																																													
<b>Income</b> Attach Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld.  If you did not get a W-2, see page 21.  Enclose, but do not attach, any payment.		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">7 Wages, salaries, tips, etc. Attach Form(s) W-2.</td> <td style="text-align: right;">7</td> </tr> <tr> <td colspan="2">8a Taxable interest. Attach Schedule 1 if required.</td> <td style="text-align: right;">8a</td> </tr> <tr> <td colspan="2">b Tax-exempt interest. Do not include on line 8a.</td> <td style="text-align: right;">8b</td> </tr> <tr> <td colspan="2">9a Ordinary dividends. Attach Schedule 1 if required.</td> <td style="text-align: right;">9a</td> </tr> <tr> <td colspan="2">b Qualified dividends (see page 22).</td> <td style="text-align: right;">9b</td> </tr> <tr> <td colspan="2">10 Capital gain distributions (see page 22).</td> <td style="text-align: right;">10</td> </tr> <tr> <td>11a IRA distributions.</td> <td style="text-align: right;">11a</td> <td>11b Taxable amount (see page 22).</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">11b</td> </tr> <tr> <td>12a Pensions and annuities.</td> <td style="text-align: right;">12a</td> <td>12b Taxable amount (see page 23).</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">12b</td> </tr> <tr> <td colspan="2">13 Unemployment compensation and Alaska Permanent Fund dividends.</td> <td style="text-align: right;">13</td> </tr> <tr> <td>14a Social security benefits.</td> <td style="text-align: right;">14a</td> <td>14b Taxable amount (see page 25).</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">14b</td> </tr> <tr> <td colspan="2">15 Add lines 7 through 14b (far right column). This is your total income.</td> <td style="text-align: right;">15</td> </tr> </table>				7 Wages, salaries, tips, etc. Attach Form(s) W-2.		7	8a Taxable interest. Attach Schedule 1 if required.		8a	b Tax-exempt interest. Do not include on line 8a.		8b	9a Ordinary dividends. Attach Schedule 1 if required.		9a	b Qualified dividends (see page 22).		9b	10 Capital gain distributions (see page 22).		10	11a IRA distributions.	11a	11b Taxable amount (see page 22).			11b	12a Pensions and annuities.	12a	12b Taxable amount (see page 23).			12b	13 Unemployment compensation and Alaska Permanent Fund dividends.		13	14a Social security benefits.	14a	14b Taxable amount (see page 25).			14b	15 Add lines 7 through 14b (far right column). This is your total income.		15
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For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see page 74. <span style="float: right;">Cat. No. 11327A Form 1040A (2007)</span>																																															